PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notifica	correspondence includir ed below or directed oth tions.	g the l erwise	Patent, advance or in Block 1, by (a	ders and notification of specifying a new con	of m rresp	aintenance fe ondence addi	es will ress; a	l be n nd/or	nailed to the current c (b) indicating a separa	ould be completed wher orrespondence address a ate "FEE ADDRESS" for domestic mailings of the	
CURRENT CORRESPOND	ENCE ADDRESS (Note: Use Bl	ock I for	any change of address)	F	Fee(s	s) Transmittal. rs. Each addit	. This o ional r	certifi naner.	cate cannot be used for such as an assignment	comestic manings of the any other accompanying or formal drawing, must be formal drawing.	
22116	7590 02/02	/2011		ı	nave	its own certif	icate o	i maii	ing or transmission.		
							Certif	icate	of Mailing or Transm	ission	
SIEMENS CO INTELLECTUA 170 WOOD AV	AL PROPERTY DE	PART	TMENT	1 S a t	t her State addre trans	eby certify the services Postal Services to the Imitted to the Imited to Imited to the Imited to Imit	at this ce with Mail S USPTC	ree(s h suff Stop I) (571	Transmittal is being a cient postage for first SSUE FEE address a 273-2885, on the date	deposited with the United class mail in an envelop bove, or being facsimile indicated below.	
ISELIN, NJ 088	30					Alice N	1cCo	rkl	2	(Depositor's name)	
				L	^	flue	mo	<u>co</u>	rkle	(Signature)	
						April 1	19,	201	1	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVE			R ATTORNEY DOCKET NO.			NEY DOCKET NO.	CONFIRMATION NO.	
10/572,898 12/21/2006 Gert Anders							4 P 40 Australia	200	3P12785WOUS	2978	
TITLE OF INVENTION	: SYSTEM AND METH	OD FO	DR USING SERVI	CES WITHIN A COM	i MU	NICATION N	NETW	ORK		_	
APPLN. TYPE	APPLN. TYPE SMALL ENTITY		SUE FEE DUE	PUBLICATION FEE DU	UE	PREV. PAID ISSUE		FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO		\$1510	\$300		\$0	1		\$1810	05/02/2011	
EXAMINER			ART UNIT	CLASS-SUBCLASS							
JIANG, CI	HARLES C		2472 370-466000								
1. Change of correspond	ence address or indication	n of "F	ee Address" (37	2. For printing on tl	he pa	atent front pag	ge, list				
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a							
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custor Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME A	ND RESIDENCE DAT	A TO E	BE PRINTED ON T	THE PATENT (print or	r typ	e)					
PLEASE NOTE: Un recordation as set for	less an assignee is ident th in 37 CFR 3.11. Com	ified b	elow, no assignee of this form is NO	data will appear on th T a substitute for filing	ne pa g an a	stent. If an as assignment.	ssignee	e is id	entified below, the do	cument has been filed for	
(A) NAME OF ASSI	GNEE			(B) RESIDENCE: (C	TTY	and STATE (OR CC	UNT	RY)		
	Siemens Aktie	nges	ellschaft,	Muenchen, F	ed	eral Rep	oub1	ic	Germany		
Please check the approp	riate assignee category o	catego	ories (will not be pr	rinted on the patent):		Individual [Cor	porati	on or other private gro	up entity 🔲 Governmen	
4a. The following fee(s)	are submitted;		41	o. Payment of Fee(s): (l		se first reapp	oly any	prev	iously paid issue fee s	hown above)	
Issue Fee A check is enclos											
Publication Fee (No small entity discount permitted) Advance Order - # of Copies Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(inionari ar aradit any			
Advance Order -	# of Copies			overpayment, to D	reby Depo	sit Account N	cnarg umber	e the i	equired fee(s), any def	extra copy of this form).	
5. Change in Entity Sta	ntus (from status indicate	d abov	e)								
a. Applicant clain	ns SMALL ENTITY stat	us. See	37 CFR 1.27.	☐ b. Applicant is no	lon	ger claiming S	MALI	L ENT	TITY status. See 37 CF	R 1.27(g)(2).	
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fee (if rec records of the United St	uired) ites Pa	will not be accepte tent and Trademark	d from anyone other the Office.	nan t	he applicant; a	a regist	tered a	attorney or agent; or the	e assignee or other party	
Authorized Signature	. Time	(2 Da			Date	Apr	<u>il</u>	19, 2011	100000000000000000000000000000000000000	
Typed or printed name Tina Gonka						Registration No. <u>L0623</u>					
This collection of informan application. Confider	nation is required by 37 ontiality is governed by 33 and application form to the	CFR 1.5 U.S.C	311. The information of the state of the sta	on is required to obtain 1.14. This collection is	or i	etain a benefi	t by the	e publ	ic which is to file (and to complete, including	by the USPTO to proces g gathering, preparing, and ne you require to comple	

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.